

Vermont Medicaid and Exchange Advisory Committee Meeting Agenda

1.	10:00	Call to Order	Mary Kate Mohlman & Sharon Henault, Co-Chairs
2.	10:05	Roll Call Establish Quorum Approve Previous Minutes	Zack Goss, Director of Customer Communication (Department of Vermont Health Access, "DVHA")
3.	10:10	CHC Outage Update	Lisa Hurteau, Director Pharmacy (DVHA)
4.	10:25	Medicaid Renewal Status Update	Adaline Strumolo, Acting Commissioner (DVHA)
5.	10:45	Chair Update	Mary Kate Mohlman & Sharon Henault, Co-Chairs
6.	11:00	Global Commitment Waiver Presentation	Ashley Berliner, Healthcare Policy Director (DVHA)
7.	11:20	Medicaid Director Intro and Role	Monica Ogelby, Medicaid Director, Agency of Human Services
8.	11:35	Commissioner's Office Update	Adaline Strumolo, Acting Commissioner (DVHA)
9.	11:45	Public Comment	Mary Kate Mohlman & Sharon Henault, Co-Chairs
10.	11:55	Final Committee Discussion	Mary Kate Mohlman & Sharon Henault, Co-Chairs
11.	12:00	Adjourn	Mary Kate Mohlman & Sharon Henault, Co-Chairs

March 25, 2024
10:00 am - 12:00 pm



Roll Call, Quorum, February 26, 2024 Meeting Minutes

Zack Goss, Director of Customer Communication (DVHA)

Change Healthcare Cyber Security Incident Update

Lisa Hurteau, Director of Pharmacy (DVHA)

- **Change Healthcare (CHC)** (or OptumRx) is Vermont Medicaid's Pharmacy benefit administrator (PBA) and also operates pharmacy claims processing. They are a 3rd party state contractor.
- On **Wednesday, 2/21** CHC experienced a cyber security incident to their system.
 - Once CHC was aware of the issue, they took their systems offline immediately as a security measure.
- **As of 3/18, Vermont Medicaid's pharmacy claims system is back online.**

Background

- **CHC has not informed the State that any confidential or personal member information was compromised** but has indicated that the impact is nationwide.
- Many different providers were impacted. This issue extends beyond pharmacies, and beyond Medicaid.
- **The State of Vermont remains secure.** The State is confident that no state systems were compromised in this attack.
- Throughout this incident, DVHA has remained in touch with the Center for Medicare and Medicaid Services (CMS) and engaged in the national response.

- DVHA remains in COOP (Continuity of Operations) protocol to ensure responsiveness to any developments.
- DVHA focused on Medicaid member access to services and provider stability during the outage.
- DVHA recognizes the burden this outage created on pharmacies and providers and extends sincere appreciation to all who have been impacted.
- While prescription claims processing were down, **members could still access prescriptions.**

DVHA Response: Pharmacies

- DVHA issued instructions to pharmacies, providers, and members about access (**see links in final slide**).
- DVHA has reminded pharmacies and providers to adhere to Medicaid provider agreements which **prohibit** billing members when Medicaid will pay for services, and reinforced this as needed.
- DVHA established an advance payment mechanism to pharmacies to ensure they were paid for covered services and could remain operational during the outage.
 - **DVHA is issuing payments to pharmacies on a weekly basis** according to their average weekly claims. DVHA is working closely with pharmacies to ensure their needs are met and will continue to do so.

DVHA Response: Pharmacies

- The outage impacted the prior authorization process. DVHA issued instructions to pharmacies and providers regarding prescriptions that require prior authorization.
- DVHA is holding regular informational question and answer sessions with pharmacists. Change Healthcare Pharmacy Help Desk: 1-844-679-5362
- Copays: Vermont Medicaid removed copay requirements for all members for the duration of the outage (February, 21 – March 18, 2024). Vermont Medicaid will pay the entire claim amount, including any copay amount typically collected from the member. **Pharmacies will not lose reimbursement for the copay amount.**

DVHA Response: Provider Resources

- Other Medicaid providers are impacted by the incident because of their internal claims submission systems, but CHC is unable to provide DVHA with a list.
 - There may be some remaining issues with non-pharmacy providers.
- DVHA has created an email address for any impacted for providers to address claims submission and payment issues
 - AHS.DVHAChangeHealthcareServiceOutage@vermont.gov
- DVHA is directly outreaching providers with known impacts.

- Members can call the CHC or OptumRx Help Desks with any issues:
 - **Change Healthcare Pharmacy Help Desk at 1-844-679-5362**
 - **Optum Pharmacy Help Desk at 1-800-880-1188**
- DVHA continues to issue communications and operate with transparency during and after the outage. We appreciate the patience and flexibility from providers, pharmacies, and members as this issue is addressed. **Thank you for your support.**

DVHA Communications to date

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- [Important Change Healthcare Outage](#) 2.23.24
- [Change Healthcare Outage FAQ's](#) 2.26.24
- [JCode Submission Process during Change Healthcare System Outage](#) 2.27.24
- [Claim Processing and Medicaid Member Billing](#) 2.28.24
- [Gainwell Prescriber Claims Processing, Eligibility, and Prior Authorization](#) 2.29.24
- [Change Healthcare Outage Member Text](#) 3.1.24
- [Regulations and Best Practices for Pharmacists Dispensing Controlled Substances During the Network Service Outage](#) 3.1.24
- [Vermont Medicaid Voice Response System \(VRS\) Instructions for Eligibility](#) 3.4.24
- [Gainwell Provider Email Advance Instructions](#) 3.4.24
- [The Department of Vermont Health Access Update on Change Healthcare Cyber Security Incident](#) 3.8.24

DVHA Communications to date

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- [Gainwell Provider Email Advance Instructions](#) 3.11.24
- [Pharmacy Copayments - Temporary Elimination](#) 3.15.24
- [Update on Change Healthcare Network Outage](#) 3.18.24
- [Gainwell Provider Email Advance Important Information](#) 3.18.24

[Pharmacy | Department of Vermont Health Access](#)

DVHA has issued 52 unique external communications since 2/22.

DVHA Press Releases

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February 23rd: [State Medicaid Pharmacy Claims Contractor Experiences Cyber Security Issue and Service Outages](#)

February 28th: [Change Healthcare Cyber Security Issue Update](#)

March 1st: [Department of Vermont Health Access Thanks Members and Pharmacies for Their Patience During Change Healthcare Cyber Security Issue](#)

March 8th: [The Department of Vermont Health Access Provides Update on Change Healthcare Cyber Security Incident](#)

March 15, 2024: [The Department of Vermont Health Access Encourages Providers to Determine Their Need for Advance Payments](#)

March 18, 2024: [Update from The Department of Vermont Health Access on Change Healthcare's Network Outage](#)

Thank you!

Alex.McCracken@vermont.gov

Please reach out anytime if you have questions or issues to flag for DVHA on this matter.

Medicaid Renewal Status Update

Adaline Strumolo, Acting Commissioner (DVHA)

Medicaid Renewal Dashboards – Discussion

<https://dvha.vermont.gov/unwinding/renewal-dashboard>

Chair Update

Mary Kate Mohlman & Sharon Henault , Co-Chairs

Global Commitment Waiver Presentation

Ashley Berliner, Healthcare Policy Director (DVHA)

Amendment Request: Vermont's Global Commitment to Health 1115 Waiver

Timeline

State public comment period	3/20 – 4/19
Finalize application based on public's feedback	4/22 – 4/30
Submit to CMS	4/30
CMS initiates 15-day completeness check	5/1 – 5/16
Federal public comment period	5/17 – 6/17
CMS negotiations	6/17 – ?

What's in the Proposed Waiver Request?

Proposal 1

Expand Access to Care for Vermonters with Mental Health Conditions and Substance Use Disorder

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Transition CRT and Mental Health Under 22 (iHCBS) Benefits to the Medicaid State Plan.

- Establish CRT and Mental Health Under 22 program benefits as entitlements under the State Plan for individuals enrolled in Medicaid.
- The CRT and Mental Health Under 22 programs will no longer be “special programs” under the 1115 with one exception: Vermont will continue to use the 1115 to authorize the provision of CRT benefits to adults with SMI who have incomes above Medicaid limits.
- Vermont will use state funds to cover certain home and community-based services that are not coverable under Section 1905(a) of the Social Security Act (respite and supportive employment)
- Vermont intends to continue to cover the CRT enhanced dental benefit under the Global Commitment demonstration.

Proposal 2

Expand Access to Care for Vermonters with Mental Health Conditions and Substance Use Disorder

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Cover the Totality of Costs for Residential Treatment

- Current federal rules prohibit Medicaid from covering room and board for stays at residential facilities, except for stays at IMDs for individuals ages 65 and over and stays at psychiatric residential treatment facilities for youth under 21.
- Vermont requests for Medicaid to cover room and board for the duration of medically necessary treatment at residential mental health and SUD facilities, excluding IMDs.

Proposal 3

Expand Access to Care for Vermonters with Mental Health Conditions and Substance Use Disorder

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Closing the Coverage Gap for Substance Use Disorder Community Intervention and Treatment (SUD CIT) Expansion Group

- Vermont intends to launch the SUD CIT expansion group in 2026.
- The SUD CIT program will allow individuals with incomes above Medicaid limits diagnosed with SUD to access an array of SUD benefits. Today, the GC waiver authorizes eligibility for the SUD CIT expansion group for individuals with a SUD whose income is above 133% of the federal poverty level (FPL) up to and including 225% FPL.
- In creating the SUD CIT expansion group, the State intended for all Vermonters with incomes above Medicaid limits up to and including 225% FPL to have access to this important program. Vermont's income limit for Medicaid for its aged, blind, and disabled (MABD) population is capped at the medically needy income level (MNIL), meaning that there is an eligibility gap for some individuals with incomes from roughly 100% to 133% FPL (i.e., individuals who fall into the medically needy eligibility group).
- Vermont is seeking to implement a technical correction to modify eligibility for the SUD CIT expansion group so that an individual is eligible when their income is above the applicable Medicaid limit (MNIL for MABD, 133% FPL for other eligibility groups) up to and including 225% FPL.



Proposal 4

Providing Housing and Other Supports to Promote Whole-Person Health

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Coverage of Medical Respite and Rent/Temporary Housing Under the Supportive Housing Assistance Pilot

- Vermont seeks to create a new benefit tier under the Supportive Housing Assistance Pilot to offer up to 6 months of medical respite and rent/temporary housing, as clinically indicated.
- To be eligible for this tier, an individual must be a Medicaid enrollee aged 18 and over receiving full State Plan benefits who has a history of homelessness (including if they are currently or formerly homeless) or is at risk of homelessness and meets other needs-based criteria.
- Vermont already has the ability to institute an enrollment cap and waitlist for the Supportive Housing Assistance Pilot and requests to extend this flexibility, including the ability to prioritize individuals seeking these benefits, to this new Pilot tier.



Proposal 5

Providing Housing and Other Supports to Promote Whole-Person Health

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HRSN Infrastructure

- Vermont requests \$10.4 million in federal Medicaid matching funds for investments in HRSN infrastructure to support capacity building among community-based organizations, social services providers, and other community partners that will enhance their ability to successfully deliver medical respite, rent/temporary housing, and community transition services to eligible Medicaid enrollees.
- Funding will also be used to support statewide infrastructure capacity to enable delivery of housing services under Medicaid.

Proposal 6

Providing Housing and Other Supports to Promote Whole-Person Health

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Adding a New Benefit to the Developmental Disabilities Services Program

- Vermont is seeking to expand the benefit package for the Developmental Disabilities Services program to include an environmental and assistive adaptation service, defined as physical adaptations, services, or technology necessary to ensure health and safety of the individual or to enable greater independence.

Ability to Implement Hospital Global Payments

- Vermont is pursuing participation in CMS's States Advancing All-Payer Health Equity Approaches and Development (AHEAD) Model.
- Hospitals participating in the AHEAD Model will be reimbursed for services rendered to Medicare fee-for-service enrollees through fixed prospective global budgets. The AHEAD Model will also require that Vermont develop a parallel global budget methodology for Medicaid payments to participating hospitals.
- To do so, Vermont is proposing to request the ability to institute Medicaid hospital global payments without being required to reconcile the payments against actual utilization.
- Under the VTAPM, Vermont has been able to approximate unreconciled global payments for Medicaid services for hospitals via the State's ACO for ACO-attributed Medicaid members. Under AHEAD, Vermont would like to make similar fixed global budget payments directly to hospitals, or through a third-party administrative services organization procured by the State, and needs expenditure authority to do so.

Additional Public Comment Details

The full draft of the Global Commitment demonstration amendment application can be found at: <https://humanservices.vermont.gov/about-us/medicaid-administration/global-commitment-health-1115-waiver/1115-waiver-documents>

Written comments may be sent to the following address; please indicate “1115 Amendment Public Comment” in the written message:

Medicaid Policy Unit
280 State Drive, NOB 1 South
Waterbury, VT 05671-1010

Comments may also be emailed to AHS.MedicaidPolicy@vermont.gov. Please indicate “1115 Amendment Public Comment” in the subject line of the email message.

First Public Hearing (In-Person Only)

Friday, April 5 from 9:00 – 9:30 AM ET
Charlotte Library
115 Ferry Rd
Charlotte, VT 05445

Second Public Hearing (Virtual and In-Person)

Wednesday, April 10 from 9:30 – 10:00 AM ET

Virtual Meeting Details

Call in: +1 802-552-8456,,53132956#

Phone Conference ID: 531 329 56#

Video Conference: <https://bit.ly/48FwCFL>

Meeting ID: 298 196 082 421

Passcode: kYR68M

In-Person Meeting Details

Waterbury State Office Complex

Room: Oak

280 State Drive

Waterbury, VT 05676



Medicaid Director Intro and Role

Monica Ogelby, Medicaid Director, Agency of Human Services

Commissioner's Office Update

Adaline Strumolo, Acting Commissioner (DVHA)

Public Comment & Final Committee Discussion

Adjourn

Mary Kate Mohlman & Sharon Henault , Co-Chairs